

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000102912

FILED
Apr 10, 2012
Secretary of State

Entity Name: FLORIDA UROLOGY PHYSICIAN NETWORK, LLC

Current Principal Place of Business:

80 DOCTORS DRIVE
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

80 DOCTORS DRIVE
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 26-3649801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DUNN, NEAL P MD
80 DOCTORS DRIVE
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: GRABLE, MICHAEL S MD
Address: 545 HEALTH BOULEVARD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: MGRM
Name: KLAIMAN, ALLAN P MD
Address: 1812 NORTH MILLS AVE
City-St-Zip: WINTER PARK, FL 32803

Title: MGRM
Name: DUNN, NEAL P MD
Address: 80 DOCTORS DRIVE
City-St-Zip: PANAMA CITY, FL 32405

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STANLEY FULFORD

ADMN

04/10/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date